

Reasons To Include Smokeless Tobacco and E-Cigarettes

Some facilities may think it would be easier to institute a policy that only applies to smoking, rather than creating one that includes smokeless tobacco and electronic nicotine delivery devices. The reality is that establishing a comprehensive policy that includes all forms of tobacco is more equitable, easier to enforce, and has better health outcomes. Here are the reasons.

Smokeless does NOT mean harmless.

The makers of smokeless tobacco want people to believe that their products are “safer” than cigarettes and can even be used as an aid in quitting smoking. The fact is that chewing tobacco and snuff contain over 28 cancer-causing agents. The most harmful carcinogens in smokeless tobacco are the tobacco-specific nitrosamines, which are formed during the growing, curing, fermenting, and aging of tobacco. Other cancer-causing substances in smokeless tobacco include formaldehyde, hydrazine, arsenic, nickel, cadmium, benzopyrene, and polonium-210.¹

Chew tobacco users increase their risk of oral cancer, which can include cancer of the lip, tongue, cheeks, gums, and the floor and roof of the mouth. Some of the other effects of using smokeless tobacco include addiction to nicotine, oral leukoplakia (white mouth lesions that can become cancerous), and gum disease.¹

Smokeless tobacco has very high levels of nicotine.

All forms of tobacco contain nicotine, which is highly addictive. The amount of nicotine absorbed from a dip of moist snuff tobacco is 3 to 4 times the amount delivered by a cigarette. Even though nicotine is absorbed more slowly from chew tobacco than from cigarettes, chew tobacco users absorb more nicotine per dose and it stays in the bloodstream for a longer time.¹ This makes quitting very difficult.

E-cigarettes and other electronic nicotine devices can be harmful too.

E-cigarettes and e-hookahs are battery operated devices that people use to inhale nicotine, which is derived from the tobacco plant. Instead of smoke, the user inhales an aerosol that contains nicotine, flavorings, and ultrafine particles. Harmful substances in the liquid and/or aerosol include tobacco specific nitrosamines, heavy metals, formaldehyde, propylene glycol, and others that can cause cancer.² While there is inadequate research about the long-term health effects, users have experienced numerous short-term effects such as respiratory irritation, asthma attacks, impaired lung function, and lipid pneumonia.³ Breathing secondhand aerosol emissions is also a concern because it has been found to contain nicotine and other harmful chemicals.⁴ There is no clinical evidence that the use of these electronic nicotine delivery devices can improve outcomes for people who are trying to quit smoking.⁵ They are unregulated products designed to maintain nicotine addiction and generate income for tobacco companies, not to help people quit.

Marketing of smokeless, cigars, and e-cigarettes is growing rapidly.

While advertising and promotion of smokeless tobacco and cigars has grown over the years, the marketing of e-cigarettes has been increasing at a very rapid pace since the major tobacco companies are now producing e-cigarettes. Marketing includes the distribution of free samples, multi-media advertising, point-of-sale promotions, and other methods. Unfortunately, many of these messages reach children, their future customer base. Currently, there are no marketing regulations, no age restrictions for purchase, and no warning label requirements for e-cigarettes. Manufacturers have promoted the misconception that e-cigarettes are a safe product and that it is "just harmless water vapor" inhaled and exhaled by the user. Although tobacco companies are legally prohibited from marketing e-cigarettes as cessation devices, much of their advertising implies that e-cigarettes can help smokers quit.

All tobacco users - smokers, chewers, and vapers - are treated equally.

Policies that are fair and equitable will garner more support and compliance from employees and community members. If a policy applies only to smoking and doesn't restrict other forms of tobacco, it can be viewed by some as targeting or singling out people who smoke. Because e-cigarettes can resemble traditional cigarettes and emit aerosol that looks like tobacco smoke, they have the potential to undermine healthy social norms and make policies harder to enforce. The goal of a tobacco free hospital policy is to improve health, which can best be accomplished when all forms of tobacco, including e-cigarettes, are included in the policy.

Your policy won't encourage smokers to switch to other harmful products.

A policy that prohibits smoking and doesn't address all forms of tobacco can inadvertently encourage employees to use smokeless tobacco or e-cigarettes during their work hours. Also, some patients may consider using these products instead of the nicotine replacement therapy that is offered to them during their hospitalization.

Tobacco-laden sputum and cigarette litter can be reduced.

The chemicals in snuff and chewing tobacco cause the user to have increased salivation. While some people swallow the juices, many people spit either into a container or directly onto the ground. This tobacco-laden sputum on your property is unsightly and can potentially spread diseases from exposure to this body fluid. Also, with fewer people smoking on your property, cigarettes litter can be greatly reduced.

Sources:

¹ National Cancer Institute. Smokeless Tobacco and Cancer: Questions and Answers, available at: www.cancer.gov/cancertopics/factsheet/Tobacco/smokeless

² Grana, et al, Background Paper on E-cigarettes, Center for Tobacco Control Research and Education University of California, San Francisco; http://arizonansconcernedaboutsmoking.com/201312e-cig_report.pdf

³ Vardavas, et al., Short-term pulmonary effects of using an electronic cigarette: impact on respiratory flow resistance, impedance, and exhaled nitric oxide *Chest*. 2012 Jun;14; <http://www.ncbi.nlm.nih.gov/pubmed/221945871>

⁴ Americans for Nonsmokers Rights, Electronic (e-) Cigarettes and Secondhand Aerosol, available at: <http://www.no-smoke.org/pdf/ecigarette-secondhand-aerosol.pdf>

⁵ Pepper, JK, Brewer, NT., Electronic nicotine delivery system (electronic cigarette) awareness, use, reactions and beliefs: a systematic review. Tob Control Published online first: November 20, 2013. Doi: 10.1136/tobaccocontrol-2013-051122